

Dr PV Gudi and Partner

Inspection report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Dr PV Gudi and Partner on 5 March 2019 as part of our inspection programme.

The practice was rated as requires improvement for the safe and effective key questions and requires improvement overall at the previous inspection in January 2018. You can read the report from our last comprehensive inspection on 18 January 2018; by selecting the 'all reports' link for Dr P V Gudi and Partner on our website at www.cqc.org.uk.

This report covers our findings in relation to improvements made since our last inspection and any additional improvements we found at this inspection. The report covers our findings in relation to all five key questions and six population groups.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as Good for all population groups and good overall, except for the safe key question which we have rated as requires improvement.

We rated the practice as requires improvement for providing safe services because:

- The system for learning from incidents and significant events had been implemented to ensure all staff were aware of the actions taken. However, we found there was a lack of understanding with the staff of what constituted a significant event and inconsistency in the recording of these.
- On reviewing the completed training schedule for staff, we found some of the clinical team had not completed the practice's mandatory training schedule. This included infection prevention, fire and health and safety training. Since the inspection we have received confirmation that training had been completed.
- The practice was unable to demonstrate that some of the clinical staff had received immunisations that were appropriate their role. Since the inspection we have received evidence to confirm that the relevant blood tests and immunisations have been given.

- The practice had not followed their recruitment procedures and had not ensured that all the relevant checks were carried out prior to employment. This included: Evidence of conduct in previous employment. Since the inspection we have received confirmation that the appropriate checks have been completed.

We rated the practice as good for providing effective, caring, responsive and well led services because:

- The practice had reviewed their current appointment system and had increased the length of appointment times for one of the clinical team to ensure waiting times were reduced for patients attending appointments.
- Systems and processes had been introduced to ensure patients with long term conditions were monitored and reviewed appropriately.
- The practice continued to identify carers and had seen an increase in the number of carers on the practice register.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

The areas where the provider **should** make improvements are:

- Review current processes for the recording of significant events to ensure they are relevant and all staff have a clear understanding of what constitutes a significant event.
- Continue to gather patient feedback to improve satisfaction scores for consultations with GPs.
- Continue to monitor staff immunisation status to ensure records are up to date.
- Review the current processes for monitoring of staff training to identify gaps in staff updates relevant to their role.
- Formally assess the need for a hearing loop to ensure that reasonable adjustments are made for patients where needed.
- Continue to identify carers to offer them support where needed.
- Ensure the relevant checks are completed for employing new members of staff.

Overall summary

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor.

Background to Dr PV Gudi and Partner

Dr P V Gudi and Partner is located in Hill Top, West Bromwich an area of the West Midlands. The provider is registered with CQC to deliver the Regulated Activities; treatment of disease, disorder or injury, diagnostic and screening procedures, family planning, maternity and midwifery services and surgical procedures.

The practice is situated within the Sandwell & West Birmingham Clinical Commissioning Group (CCG) and provides services to 4,600 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice has two GP partners (one male and one female) and one salaried GP (one male). The GPs are supported by a practice nurse. There is a part time practice manager who is supported by a team of reception and administrative staff.

Information published by Public Health England rates the level of deprivation within the practice population group as two, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Based on data available from Public Health England 67% of the practice population is from a white background.

The practice doors open between 8am and 7pm Monday to Friday. The telephone lines are available from 8am to 6.30pm. Consultation times are 9am to 12.30pm and 4pm to 6.30pm daily, with the exception of Thursday when the last appointment is at 5.50pm. Extended opening hours are on a Monday and Wednesday evening between 6.30pm and 7pm. As part of the hub for extended hours, patients can access appointments at local practices between 6.30pm to 8pm Monday to Friday, 9am to 1pm Saturday and 10am to 2pm Sunday. When the practice is closed, out of hours services are provided by Malling Health.